Health Professions Appeal and Review Board

Health Services Appeal and Review Board

Transitional Physician Audit Panel

Ontario Hepatitis C Assistance Plan Review Committee

Commission d'appel et de révision des professions de santé

Commission d'appel et de révision des services de santé

Le comité provisoire de vérification des honoraires de médecins

Comité de révision du Programme ontarien d'aide aux victimes de l'hepatite C

Ontario

Annual Report 2011 - 2012

Health Professions Appeal and Review Board	**Commission d'appel et de révision des professions de santé**
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Ontario Hepatitis C Assistance Plan Review Committee	**Comité de révision du Programme ontarien d'aide aux victimes de l'hepatite C**

Ontario

June 30, 2012

The Honourable Deb Matthews
Minister of Health and Long-Term Care
Minister's Office
Hepburn Block, 10th Floor
80 Grosvenor Street
Toronto, ON
M7A 2C4

Dear Minister:

RE: Health Professions Appeal and Review Board, Health Services Appeal and Review Board, Transitional Physician Audit Panel and the Ontario Hepatitis C Assistance Plan Review Committee Annual Reports

On behalf of the Health Professions and Health Services Appeal and Review Boards, the Transitional Physician Audit Panel and the Ontario Hepatitis C Assistance Plan Review Committee, it is my pleasure to submit our Annual Reports for the fiscal year of 2011-2012.

The Boards, Panel and Committee remain committed to the initiatives outlined in the report and to ensuring excellence in the service it provides to the Ontario public.

Yours sincerely,

Linda P Lamoureux

Linda P. Lamoureux
Chair
Health Professions Appeal and Review Board
Health Services Appeal and Review Board
Transitional Physician Audit Panel
Ontario Hepatitis C Assistance Plan Review Committee

c: Lori Coleman, Chief Operating Officer, Health Boards Secretariat
Registrar, Health Professions and Health Services Appeal and Review Boards, Transitional Physician Audit Panel and Ontario Hepatitis C Assistance Plan Review Committee

151 Bloor Street West, 9th Floor
Toronto, Ontario M5S 1S4

Tel/Télé 416-327-8512
Toll free/Sans frais 1-866-282-2179
TTY/ATS 416-326-7TTY(889)
TTY Toll free/ATS sans frais 1-877-301-0TTY(889)
Facsimile/Télécopieur 416-327-8524

151, rue Bloor ouest, 9e étage
Toronto, Ontario M5S 1S4

Health Professions Appeal and Review Board

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Ontario

June 30, 2012

Ms. Linda Lamoureux
Chair
Health Professions and Health Services Appeal and Review Boards
Transitional Physician Audit Panel
Ontario Hepatitis C Assistance Plan Review Committee
151 Bloor Street West, 9th Floor
Toronto, ON M5S 1S4

Dear Ms. Lamoureux,

It is my pleasure to report to you on behalf of the Health Boards Secretariat. The Health Boards Secretariat (Secretariat) provides comprehensive administrative, corporate, fiscal and case management support to the Health Professions Appeal and Review Board, the Health Services Appeal and Review Board, the Transitional Physician Audit Panel and the Ontario Hepatitis C Assistance Plan Review Committee (the Health Boards). In addition, the Secretariat provides a similar support function to other adjudicative tribunals as well as payment processing functions for health related services.

Over the past year, the Secretariat has continued to work collaboratively with the Health Boards to reduce the active appeal base across the adjudicative health boards, to further shorten appeal processing times, and to develop procedures designed to simplify the administrative procedures associated with the appeals process. While intake of new applications continues to increase, enhancements to integrated operations combined with the dedication of staff and members to the work of the Boards has resulted in a significant reduction in the active appeal base of the Boards.

As in previous years, funding is allocated to the Secretariat from the Consolidated Revenue Fund. There are some limitations in detailing expenditures as they relate specifically to the agencies supported by the Secretariat. You will note that expenditures such as salaries and facilities are not included in the financial data on pages 19 and 23-25. It would be arbitrary to determine what portion of cost should be attributed to the Health Professions or the Health Services Appeal and Review Boards, Ontario Hepatitis C Assistance Plan Review Committee or Transitional Physician Audit Panel alone. These shared costs are incorporated in the fiscal planning cycle by the Secretariat and are reported to the Ministry.

Expenditure related directly to the Health Boards has decreased over the past fiscal year. Although the productivity of the Boards has increased, particularly with respect to decisions rendered by the Boards, the decrease in costs is attributed to efficiencies gained with experienced staff and members, as well as more streamlined processes. Financial pressures attributed to the activity of the Health Boards remains primarily associated with an increase of 100% in the per diem rate for Board members with no increase

to the base funding allocation of the Secretariat. The Secretariat remains committed to working with the Health Boards and their members in exercising strong controllership practices to minimize expenditure while enabling access to justice.

I trust that this information is of assistance to you, and I look forward to continuing to lead services providing support to the Health Professions and Health Services Appeal and Review Boards, the Transitional Physician Audit Panel and the Ontario Hepatitis C Assistance Plan Review Committee.

Yours truly,

Lori Coleman

Lori Coleman
Chief Operating Officer, Health Boards Secretariat
Registrar, Health Professions and Health Services Appeal and Review Boards, Transitional Physician Audit Panel and Ontario Hepatitis C Assistance Plan Review Committee

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A. MESSAGE FROM THE CHAIR

As Chair of the Health Professions and Health Services Appeal and Review Boards, the Transitional Physician Audit Panel and the Ontario Hepatitis C Assistance Plan Review Committee, it is my pleasure to report on the Health Boards' activity for the period of 2011--2012. In recognition of the strong partnership between members and staff and a mutual understanding of the importance of the work we deliver on behalf of the Ontario public, I would like to thank the membership of the Health Boards, the Plan and the Committee and recognize Lori Coleman, the Chief Operating Officer of the Secretariat and the Registrar of the Health Boards, and her staff for their ongoing support. We have a great team.

The Health Professions Appeal and Review Board is trusted with protecting the public interest, providing a common framework for overseeing aspects of Ontario's self- regulated health professions, human and animal, and providing an independent forum for the public and health professionals. The Health Services Appeal and Review Board serves to conduct hearings and reviews and to make decisions, orders and recommendations concerning decisions made by parties acting under 12 pieces of legislation. The Transitional Physician Audit Panel hears appeals from decisions made by the General Manager of OHIP in respect of payments to physicians. The Ontario Hepatitis C Assistance Plan Review Committee hears appeals from decisions made by the Ontario Hepatitis C Assistance Plan. During the period of this Annual Report, the Boards, Panel and Committee continued to focus on improving the quality, access and timeliness of its' services.

While the Report sets out a number of achievements, I would like to highlight two areas:

i. **Decreased Resolution Processing Times:** Ongoing efforts to improve the resolution and conclusion time for all matters continue by reducing file processing times. Specifically, in the 2009 - 2010 fiscal year, only 51% of active files were less than one year old. In the 2010 - 2011 fiscal year, that rate improved to 65%. At present, 82% of active matters are less that one year old demonstrating that matters are resolved and concluded more efficiently than in previous years. These accomplishments are the culmination of an improved case management process, and continuing education and training designed to improve the quality and timeliness of decision-making.

ii. **Access to Justice and Public Education:** The Health Boards continue in their active commitment to access to justice and public awareness and education in health law in two key areas - publically posting final decisions and working with law students.

Health Board decisions are now available at www.canlii.org. This initiative began in August 2010, and by this reporting period all final decisions of the Health Professions and Health Services Appeal and Review Boards are posted online through the Canadian Legal Information Institute (CanLII). The availability of this information provides valuable information to the public and stakeholders and assists parties in preparing for hearings and reviews.

The Health Boards work with the Internationally Trained Lawyers Program, the Advocacy Project with the Medico-Legal Society of Toronto and Pro Bono Students Canada, and headnoting and clerking programs with students from the faculties of law at the University of Ottawa, the University of Toronto, and Osgoode Hall Law School continues.

It is a pleasure to work with such a dedicated team of colleagues and staff who share a commitment to public service. In the coming year we will continue our efforts to improve the service we provide.

B. MANDATE OF THE HEALTH PROFESSIONS APPEAL AND REVIEW BOARD

The Health Professions Appeal and Review Board (HPARB) is an independent adjudicative tribunal created by the *Ministry of Health and Long-Term Care Appeal and Review Boards Act, 1998* that provides oversight to the regulated health professions and veterinarians of Ontario.

The HPARB is a lay Board, made up of members of the public, appointed by the Government of Ontario, none of whom can be or ever have been a member of any of the regulated health Colleges.

Under the *Regulated Health Professions Act, 1991* and the *Veterinarians Act*, the HPARB functions as a quasi-judicial adjudicative and regulatory tribunal with jurisdiction respecting the regulatory activities of twenty-seven Colleges governing twenty-nine regulated health professions (human and animal), and the practice privilege decisions of the Health Boards of 155 public hospitals. The Board also hears appeals from the decisions of the Accreditation Committees for pharmacies and veterinarian facilities.

Regulated Health Professions

•	Audiology	•	Midwifery
•	Acupuncture*	•	Naturopathy*
•	Chiropody	•	Nursing
•	Chiropractic	•	Occupational Therapy
•	Dental Hygiene	•	Opticianry
•	Dental Technology	•	Optometry
•	Dentistry	•	Pharmacy
•	Denturism	•	Physiotherapy
•	Dietetics	•	Psychology
•	Homeopathy*	•	Psychotherapy*
•	Kinesiology*	•	Respiratory Therapy
•	Massage Therapy	•	Speech-Language Pathology
•	Medical Laboratory Technology	•	Traditional Chinese Medicine*
•	Medical Radiation Technology	•	Veterinary
•	Medicine		

* Transitional Councils legislated under the *Regulated Health Professions Act, 1991*. Appeal processes to the HPARB respecting these Colleges will come into effect when the statutory committee structure and registration processes are completed for the professions.

The HPARB conducts hearings and reviews, and makes decisions, orders and recommendations regarding:

- Decisions of the Inquiries, Complaints and Reports Committees (ICRC) of the self-regulating health professions Colleges in Ontario;
- Decisions of the Complaints Committee of the College of Veterinarians of Ontario;
- Orders of the Registration Committees of the Colleges;
- Physicians' hospital privileges under the *Public Hospitals Act*; and
- Accreditation of veterinary and pharmacy facilities.

It can inquire into or make a decision concerning the constitutional validity of a provision of an Act or a regulation.

The majority of the work conducted by the HPARB involves appeals of the decisions made by the ICRC of the self-regulating health professions Colleges in Ontario under the *Regulated Health Professions Act* and decisions made by the Complaints Committee of the College of Veterinarians of Ontario under the jurisdiction of the *Veterinarians Act*. The HPARB has the authority under these Acts to:

i) Confirm or rescind all or part of the Committee's decision;
ii) Make recommendations to the Committee;
iii) Require the Committee to take further action.

The HPARB also reviews or holds hearings of health professional's applications for registration or the accreditation of pharmaceutical and veterinary facilities. The HPARB has the authority to:

i) Confirm the Registration Committee's order or proposed decision;
ii) Require the College to issue a certificate of registration or licence to the applicant, if he/she completes examinations or training required by the Registration Committee;
iii) Require the College to issue a certificate of registration or licence to the applicant, with any terms or limitations the Board considers appropriate, if the applicant qualifies for registration and if the Registration Committee has exercised its power improperly;
iv) Refer the matter back to the Registration Committee.

The HPARB hears appeals with respect to practice privilege decisions of the boards of one hundred and fifty-five public hospitals. The HPARB has the authority under the *Public Hospitals Act* to:

i) Confirm the decision;
ii) Direct the Hospital Board, person, or body making the decision to take such action as directed by the HPARB;
iii) Substitute its opinion for that of the Hospital Board, person or body making the decision.

A list of statutes under which appeals and reviews may be conducted by the HPARB can be found at www.hparb.on.ca. Regulations under the statutes that may affect proceedings before the HPARB may be found at www.e-laws.gov.on.ca.

MANDATE OF THE HEALTH SERVICES APPEAL AND REVIEW BOARD

The Health Services Appeal and Review Board (HSARB) is an independent adjudicative tribunal created by the *Ministry of Health and Long-Term Care Appeal and Review Boards Act, 1998* that hears and renders decisions on disputes that arise under particular health-related statutes.

It is a lay Board made up of members of the public, appointed by the Government of Ontario, only three of whom can be members of the College of Physicians and Surgeons of Ontario.

While the majority of the work conducted by the HSARB falls under the jurisdiction of the *Health Insurance Act*, the HSARB has a review and appeal mandate under twelve different statutes, listed below:

HSARB Statutes of Authority

•	*The Ambulance Act*	•	*The Health Insurance Act*	•	*The Independent Health Facilities Act*
•	*The Commitment to the Future of Medicare Act*	•	*The Health Protection and Promotion Act*	•	*The Laboratory and Specimen Collection Centre Licensing Act*
•	*The Healing Arts Radiation Protection Act*	•	*The Home Care and Community Services Act**	•	*The Long-Term Care Homes Act***
•	*The Health Facilities Special Orders Act*	•	*The Immunization of School Pupils Act*	•	*The Private Hospitals Act*

* Previously *The Long-Term Care Act*.
**At the time of proclamation of the *Long-term Care Homes Act*, July 1, 2010, the following acts were repealed and the accompanying regulations were revoked: *The Nursing Homes Act, The Homes for the Aged and Rest Homes Act and The Charitable Institutions Act.*

The HSARB conducts hearings and reviews, and makes decisions, orders and recommendations respecting appeals of the decisions of:

- The General Manager of the Ontario Health Insurance Plan (OHIP) respecting eligibility and payment, and practitioner billing;
- Community placement services regarding eligibility for placement in a long-term care facility;
- Community-based long-term care service providers regarding the scope and level of services provided;
- The Minister and ministry officials regarding health facility licensing and municipal health boards' compliance with mandatory programs; and
- Public health officials regarding community health hazards and communicable diseases.

The HSARB cannot inquire into or make a decision concerning the constitutional validity of a provision of an Act or a regulation.

The HSARB has varied authority under the twelve different statutes for which it has an appeal and review mandate. The majority of the work conducted by the HSARB falls under the jurisdiction of the *Health Insurance Act*. The HSARB has the authority under the *Health Insurance Act* to:

i) affirm or rescind the decision;
ii) direct the General Manager to take such action as the Appeal Board considers the General Manager should take;
iii) substitute its opinion for that of the General Manager.

The HSARB has an associated, separately appointed panel called the Transitional Physician Audit Panel (TPAP) that hears appeals from decisions by the General Manager of OHIP regarding payments to physicians. Under the terms of the *Health Insurance Act*, these members can only hear matters specifically assigned to the Panel by the *Act*. It is an expert panel with a mandated composition of three legal members and six physician members appointed by the Government of Ontario, who shall not otherwise sit as members of the HSARB. As of March 31, 2010, the TPAP has been replaced by the Physician Payment Review Board (PPRB). All matters before the TPAP will be concluded in 2012 and once complete the TPAP will be dissolved.

A list of statutes under which appeals may be conducted by the HSARB can be found at www.hsarb.on.ca. Regulations under the statutes that may affect proceedings before the HSARB may be found at www.e-laws.gov.on.ca.

C. ACHIEVEMENTS OF THE BOARDS

Throughout the period of this annual report, the HPARB and HSARB (Health Boards) have achieved success in a variety of areas, which has served to strengthen its service delivery to the Ontario public. In line with the Boards' jurisdiction and mandate, the following achievements have been made:

- **Access to Justice:**
  - The Health Boards have successfully concluded the fourth year of the Student Advocacy project, in which volunteer law students can represent parties at pre-review conferences and reviews. Operating at arms-length, the Health Boards have partnered with the Medico-Legal Society of Toronto and Pro Bono Students Canada, and have involved students from the University of Toronto Law School, Osgoode Hall Law School and the University of Ottawa Law School as well as volunteers from the legal and medical professions. This partnership continues to strengthen the Boards' relationship with these organizations as well as to enhance access to justice for the public.
  - This year also saw a continued commitment towards the Headnotes and Clerkship Program provided by the Boards. Involving law students from the University of Toronto Faculty of Law, York University's Osgoode Hall Law School and the University of Ottawa Faculty of Law, the student volunteers have worked to support special projects with the Board in the development of headnote drafting and case clerk roles.
  - The Health Boards have the capacity to provide bilingual hearings and reviews throughout Ontario. In the period of this annual report, the Health Boards have conducted reviews and hearings in Toronto, London, Windsor, Ottawa, Kingston, Hamilton and Northern Ontario.
  - The Appeal Boards' commitment to access to justice across the province is exemplified by the geographic diversity of the Boards' leadership team, with full time Vice-Chairs representing Northern, Eastern and Southern Ontario.
  - In partnership with the Canadian Legal Information Institute (CanLII), the Health Boards have successfully provided online access of all decisions issued from January 1, 2010 onwards. Freedom of access to Boards' decisions increase the public's awareness of the Boards' policies and jurisdiction, and lends to the Boards' commitment in providing fair, open and accountable adjudication.

- **Accessibility:**
  - The Health Boards are committed to upholding the principles outlined in the *Accessibility for Ontarians with Disabilities Act, 2005* by ensuring that people with disabilities have the same opportunity to access and benefit from the Boards' services as others. The Health Boards have met the requirements set out in the Accessibility Standards for Customer Service.

- **Governance:**
  - In late 2008, the Chair of the Health Professions Appeal and Review Board was cross-appointed as the Chair of the Health Services Appeal and Review Board. Since that time, significant steps have been taken towards amalgamating the policies and procedures of the individual Health Boards to be consistent amongst each board. In efforts to enhance the governance and leadership across the Health Boards, as well as to provide better access to regional services, in early 2010 three of the four part-time Vice-Chair positions were converted into full-time positions. Three full-time Vice-Chairs were appointed to the Health Boards. These Vice-

Chairs, along with a growing number of the part-time membership, are cross-appointed to both the HPARB and the HSARB allowing for more flexibility in deployment of resources, enhanced service delivery throughout the province, and efficiency in shared common training across the Health Boards.
    - Maintaining a joint leadership team that serves to assist in decisions regarding the Boards' key objectives including the outreach and accessibility of stakeholders and the maintenance of high quality member competency has been a priority in 2011-2012. This joint leadership team continues to facilitate one process of leadership and consistency for Health Board members.
    - The Health Boards have seen significant success in reducing the active caseload. While intake remains high, the average lifecycle of an appeal is now less than one year. To further increase efficiency of the appeal cycle, while simultaneously reducing their environmental impact, the Boards have taken steps towards modernizing operations through the electronic transmittal of documents. The Boards continue to work with the regulatory colleges to develop such procedures, and to ensure that personal health information remains protected amid efficiency gains.
    - The Health Boards continue to convene Case Conferences for all matters before the Boards in order to clarify the jurisdiction of the Board and narrow the issues that come before it. This past fiscal year saw the continuation of Member Facilitators to lead Case Conferences.

- **Member Recruitment and Development:**
    - As of March 31, 2011, there were 47 members among the Health Boards. The Health Boards define diversity as cultural (ethnic and religious), geographic (outside the GTA), sexual orientation, and disability.The Health Boards continue in their commitment to establish a membership that is representative of the diverse population of Ontario.
    - The Boards' Education Committee regularly assesses the education and training needs of the Health Boards and arranges the delivery of appropriate training and education modules (both to orient new members and provide ongoing education to Health Board members).
        - Joint education sessions for the members of the Health Boards brought subject matter experts well known in their field of study together for discussion.
        - The Boards continue to hold frequent Presiding-Member training teleconferences which contributes to an efficient and speedy delivery of relevant training to presiding members.
    - The Health Boards have fully integrated the use of electronic decision writing tools to aid in expedition of panel decision issuance, while maintaining the Health Boards' commitment to Green Initiatives.

D. HPARB OPERATIONAL PERFORMANCE

The HPARB is an independent adjudicative tribunal with jurisdiction respecting the regulatory activities of twenty-seven Colleges governing twenty-nine regulated (human and animal) health professions, and the practice privilege decisions of the boards of one hundred and fifty-five public hospitals. The Board also hears appeals from the decisions of the Accreditation Committees for pharmacies and veterinarian facilities.

The HPARB was established to conduct hearings and reviews, and to make decisions, orders and recommendations regarding:

- Decisions made by the Inquiries, Complaints and Reports Committees (ICRC) of the self-regulating health professions Colleges in Ontario[1];
- Decisions made by the Complaints Committee of the College of Veterinarians of Ontario;
- Orders of the Registration Committees of the Colleges;
- Physicians' hospital privileges under the *Public Hospitals Act* (PHA); and
- Accreditation of veterinary and pharmacy facilities.

HPARB Intake by Case Type

HPARB INTAKE BY CASE TYPE	2007 / 2008	2008 / 2009	2009 / 2010	2010 / 2011	2011 / 2012
Complaint Review	476	386	393	488	629
PHA - Hearing	3	3	8	5	5
Registration Hearing	7	10	29	41	22
Registration Review	33	30	42	70	80
Section 26 - *Veterinarians Act*	0	0	4	0	0
Section 28 Application - RHPA Code	31	28	22	23	25
Accreditation	3	0	2	0	3
Total HPARB Intake	**553**	**457**	**500**	**627**	**764**

[1] Since June 4, 2009, the Complaints Committee has been re-formed into the Inquiries, Complaints and Reports Committee.

HPARB Intake by College: Complaint Reviews

INTAKE BY COLLEGE*					
COMPLAINT REVIEWS	**2007 / 2008**	**2008 / 2009**	**2009 / 2010**	**2010 / 2011**	**2011 / 2012**
College of Physicians and Surgeons of Ontario	66%	61%	57.5%	63%	69%
Royal College of Dental Surgeons of Ontario	10.5%	14%	14%	12%	9%
College of Nurses of Ontario	4%	4%	5%	4%	7.5%
College of Psychologists of Ontario	2.5%	3%	4%	5%	1.5%
College of Chiropractors of Ontario	2%	2%	2.5%	2%	2%
Ontario College of Pharmacists	3%	3%	5%	2%	2%
Other Colleges	12%	13%	12%	12%	9%
Total Complaint Review Intake	**476**	**386**	**393**	**488**	**629**

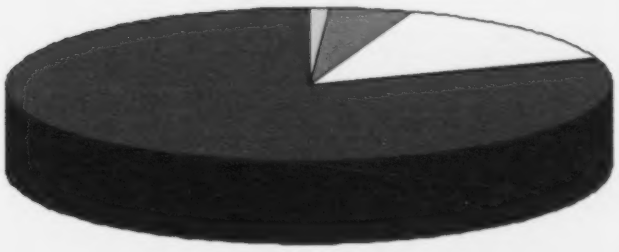
*Values represented as a percentage of all complaints received by the HPARB from all regulatory colleges. Percentages rounded to nearest 0.5.

HPARB Intake by College: Registration Matters

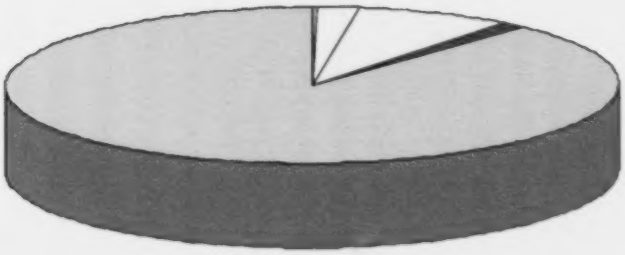
INTAKE BY COLLEGE*					
REGISTRATION MATTERS	**2007 / 2008**	**2008 / 2009**	**2009 / 2010**	**2010 / 2011**	**2011 / 2012**
College of Nurses of Ontario	42.5%	27.5%	60.5%	63%	71.5%
College of Physicians and Surgeons of Ontario	20%	25%	13%	16%	10%
College of Psychologists of Ontario	10%	12.5%	8.5%	8%	4%
Ontario College of Pharmacists	5%	0%	1%	1%	4%
College of Denturists of Ontario	0%	0%	0%	9%	2%
Other Colleges	22.5%	35%	17%	3%	9%
Total Registration Matter Intake	**40**	**40**	**71**	**111**	**102**

*Values represented as a percentage of all registration matters received by the HPARB from all regulatory colleges. Percentages rounded to nearest 0.5.

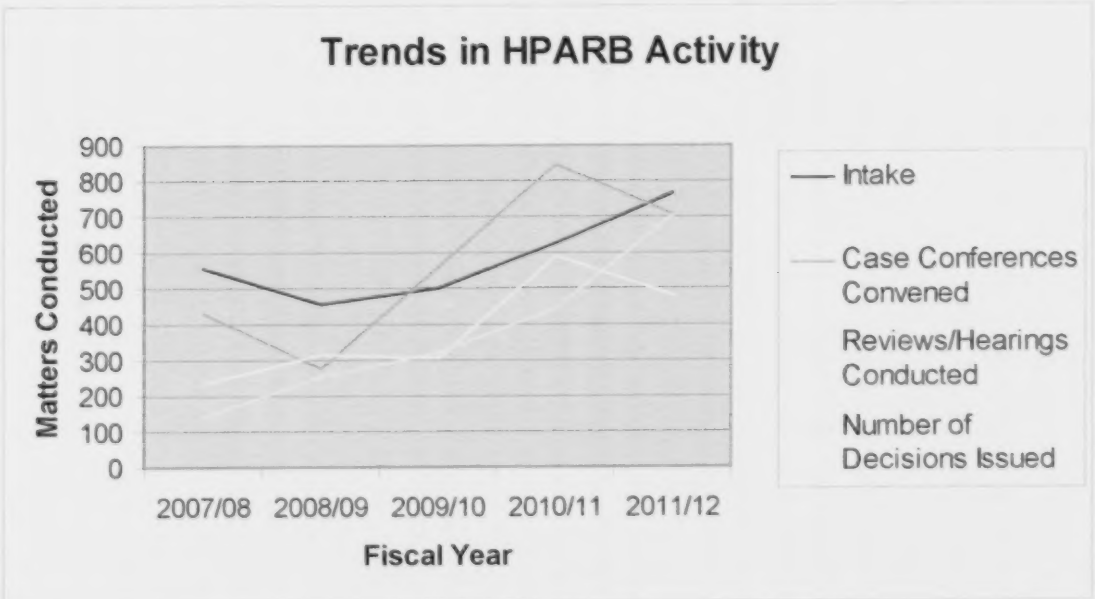
HPARB Caseload Activity



Case Conferences Convened (by Case Type)	
Accreditation Hearing	8
Registration Hearing	31
Registration Review	100
PHA Hearing	3
Complaint Review	565
Total	**707**



Review/Hearing Conducted (by Case Type)	
Accreditation Hearing	1
Accreditation Review	1
Registration Hearing	10
Registration Review	40
PHA Hearing	6
Complaint Review	424
Total	**482**



HPARB Complaint Review Caseload

COMPLAINT REVIEWS	2007 / 2008	2008 / 2009	2009 / 2010	2010 / 2011	2011 / 2012
Active Caseload at Beginning of Period	596	847	875	838	703
Intake	469	386	393	488	629
Total Case Load	1065	1233	1268	1326	1332
Decisions Issued	127	229	301	421	619
Resolved*	68	56	76	169	122
Matter Closed**	23	73	53	33	45
Total Matters Disposed Of	218	358	430	623	786
Active Caseload at End of Period	**847**	**875**	**838**	**703**	**546**

* Previously reported as withdrawn. Change in terminology reflects activity of Board and Staff members in focus on early resolution of matters.

** Includes those cases not proceeded with due to timeliness, frivolous and/or vexatious, ineligible request, no jurisdiction, abandonment and administrative closures.

HPARB Complaint Review Dispositions

COMPLAINT REVIEW CASE DISPOSITIONS [2]	2007 / 2008	2008 / 2009	2009 / 2010	2010 / 2011	2011 / 2012
Confirmed	102 (80.3%)	188 (82.1%)	256 (85%)	358 (85%)	528 (85%)
Returned	25 (19.7%)	41 (17.9%)	45 (15%)	63 (15%)	91 (15%)
Total Decisions Issued	**127**	**229**	**301**	**421**	**619**

[2] The HPARB does not render a decision on the date of a review/ hearing and therefore the number of dispositions issued in a year may not match the total matters conducted.

HPARB Registration Matter Caseload

REGISTRATION MATTERS	2007 / 2008	2008 / 2009	2009 / 2010	2010 / 2011	2011 / 2012
Active Caseload at Beginning of Period	32	44	42	66	70
Intake	40	40	71	111	102
Total Case Load	72	84	113	177	172
Decisions Issued	14	28	21	57	64
Resolved*	10	11	17	39	40
Matter Closed**	4	3	9	11	11
Total Matters Concluded	28	42	47	107	115
Active Caseload at End of Period	**44**	**42**	**66**	**70**	**57**

* Previously reported as withdrawn. Change in terminology reflects activity of Board and staff members in focus on early resolution of matters.

** Includes those cases not proceeded with due to timeliness, frivolous and/or vexatious, ineligible request, no jurisdiction, abandonment and administrative closures.

HPARB Registration Matter Dispositions

REGISTRATION MATTER CASE	2007 / 2008	2008 / 2009	2009 / 2010	2010 / 2011	2011 / 2012
Confirmed	10 (71.4%)	20 (74.1%)	11 (52.4%)	50 (88%)	53 (83%)
Returned	4 (28.6%)	7 (25.9%)	10 (47.6%)	7 (12%)	11 (17%)
Total Decisions Issued	**14**	**27**	**21**	**57**	**64**

[3] The HPARB does not render a decision on the date of a review/ hearing and therefore the number of dispositions issued in a year may not match the total matters conducted.

HPARB Recommendation Dispositions

Under section 35(1) of the *Health Professions Procedural Code*, Schedule 2 to the *Regulated Health Professions Act*, 1991, Statutes of Ontario, 1991, c.18, the HPARB is granted with jurisdiction to make recommendations to the ICRC of the Colleges of the Regulated Health Professions as well as the Complaints Committee of the College of Veterinarians of Ontario.

In past years the Board has exercised its obligation to make recommendations where deemed necessary, however, this will be the second year reporting such actions.

Recommendations are frequently made by the Board where inefficacies in college process and or policy are noted, whether the decision is returned or confirmed. In reply, the Colleges involved are generally responsive and work to improve such policies or procedures as part of a continued effort to better serve the public interest.

RECOMMENDATION BY TYPE*	2010 / 2011		2011 / 2012	
	Complaint Review	**Registration Matter**	**Complaint Review**	**Registration Matter**
Update College Practice	8 (2%)	0	13 (2%)	5 (8%)
Improve Communication Procedure	5 (1%)	7 (12%)	2 (under 1%)	18 (28%)
Total Recommendations Issued	**13 (3%)**	**7 (12%)**	**15 (2%)**	**23 (36%)**
Total Decisions Issued	**421**	**57**	**619**	**64**

*Values also represented as a percentage of all decisions issued.

HPARB FINANCIAL PERFORMANCE

HPARB					
DESCRIPTION	**2007/2008**	**2008/2009**	**2009/2010**	**2010/2011**	**2011/2012**
FINANCIAL PERFORMANCE[1]					
PER DIEM HONORARIA[2]					
Attendance at Proceedings[3]	186,379	282,958	256,871	341,652	289,615
Preparation for Proceedings	168,613	290,331	216,821	304,659	243,765
Decision Writing	144,918	566,071	550,923	575,942	499,210
Disclosure	92,360	395,857	397,826	335,878	244,870
Board Education & Administration[4]	642,209	792,362	613,013	546,092	275,562
Case Conference	251,918	77,125	130,575	187,681	134,662
PROCEEDINGS: RELATED EXPENSES					
Court Reporting Services	4,296	3,066	9,147	12,622	6,395
OTHER EXPENSES					
Independent Legal Services	252,847	178,656	118,620	198,186	201,975
Consulting	106,065	0	0	0	0
Communications[5]	167,426	289,043	183,328	201,840	183,394
Travel[6]	n/a	n/a	251,240	265,660	142,140
TOTAL	**$2,017,031**	**$2,875,469**	**$2,728,364**	**$2,970,213**	**$2,221,587**

[1] All figures in Canadian dollars, rounded to the nearest dollar.
[2] For the period of April 1, 2007 to March 31, 2008: Public member - $380; Vice-Chair - $470
For the period of April 1, 2008 to March 31, 2009: Public member - $391; Vice-Chair - $484
For the period of April 1, 2009 to March 31, 2012 Public member - $398; Vice-Chair - $491
[3] Includes attendance, deliberation and cancellations.
[4] Includes education, administration, retro payments, travel time and all Board/Committee meetings.
[5] Includes language and sign interpretation, assistive listening devices, translation, printing, copying, access fees, mailing, telephone, teleconference, and office supplies.
[6] Includes cost of travel expenses, accommodation and facility rental. Travel expenses have been isolated from communications.

E. HSARB OPERATIONAL PERFORMANCE

The HSARB is an independent adjudicative tribunal that hears and renders decisions on disputes that arise under specific health-related statutes.

The HSARB was established to conduct hearings and reviews, and to make decisions, orders and recommendations regarding:

- Decisions of the Ontario Health Insurance Plan respecting eligibility and payment;
- Decisions of agencies under the *Home Care and Community Services Act, 1994* respecting eligibility for service;
- Orders of the Medical Officer of Health or public health inspectors;
- Decisions of the Director with respect to licensing under the *Long-Term Care Homes Act, 2007*;
- Decisions of the Director with respect to licensing of independent health facilities.

HSARB Intake by Act

INTAKE BY ACT	2007 / 2008	2008 / 2009	2009 / 2010	2010 / 2011	2011 / 2012
Health Insurance Act	353	397	387	344	302
The Independent Health Facilities Act	11	9	14	7	8
The Health Protection and Promotion Act	9	11	13	12	9
The Long-Term Care Act, 1994	10	6	9	14	11
The Home Care and Community Services Act	0	0	0	8	0
The Long Term Care Homes Act	0	0	0	6	6
The Immunization of School Pupils Act	15	51	0	1	4
The Ambulance Act	0	0	0	1	0
The Heath Facilities Special Orders Act	6	0	0	0	0
Commitment to the Future of Medicare Act	1	1	1	0	1
The Charitable Institutions Act	1	0	0	0	0
The Healing Arts Radiation Protection Act	0	0	0	0	0
The Laboratory and Specimen Collection Centre Licensing Act	0	0	0	0	0
The Nursing Homes Act	0	0	0	0	0
The Private Hospitals Act	0	0	0	0	0
Homes for the Aged and Rest Homes Act	0	0	0	0	0
Total Intake	**406**	**475**	**424**	**393**	**341**

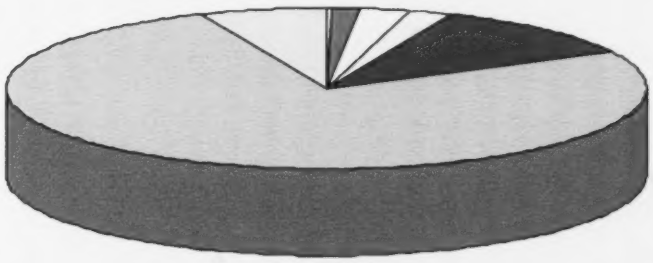
HSARB Caseload Summary

CASELOAD SUMMARY	2007 / 2008	2008 / 2009	2009 / 2010	2010 / 2011	2011 / 2012
Active Caseload at beginning of period	421	474*	600	535	457
Intake	406	475	424	393	341
Total Case Load	827	949	1,024	928	798
Total Matters Concluded **	420	349	489	471	505
Active Caseload at End of Period	**407**	**600**	**535**	**457**	**293**

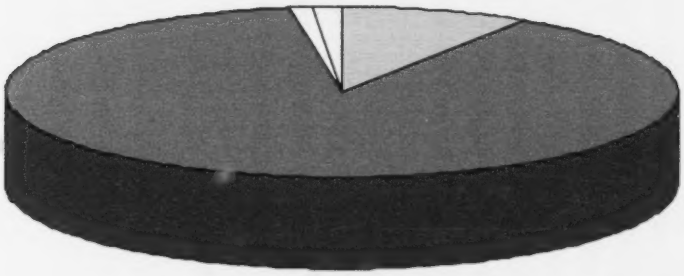
* As of the 2008-09 period, the 'Active Caseload at the beginning of the period' includes all 'decision-pending' matters.

**As of the 2008-09 period, 'Total Matters Concluded' includes those matters administratively closed, resolved, abandoned, settled or with a decision issued.

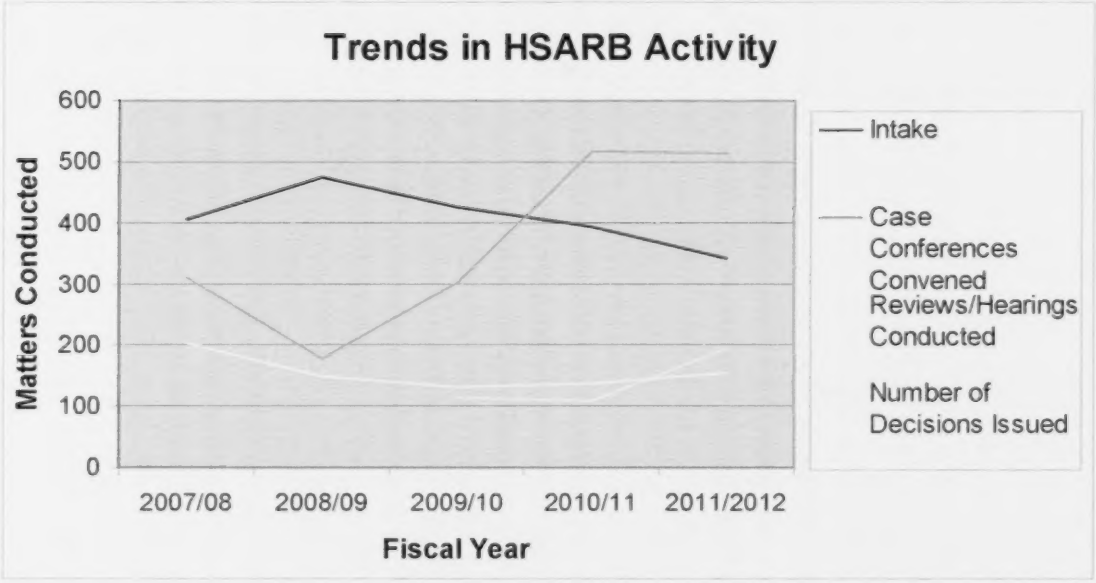
HSARB Caseload Statistics



Case Conferences Convened (by Case Type)	
Immunization of School Pupils	1
Independent Health Facilities	8
Health Protection and Promotion Act	12
Long-Tem Care Home Act	12
HIA – Eligibility	57
HIA – Subscriber	390
Home Care and Community Services	33
Total	**513**



Review/Hearing Conducted (by Case Type)	
HIA - Eligibility	14
HIA - Subscriber	137
Home Care and Community Services	2
Independent Health Facilities	2
Total	**155**



HSARB FINANCIAL PERFORMANCE

HSARB					
FINANCIAL PERFORMANCE[1]					
DESCRIPTION	**2007/2008**	**2008/2009**	**2009/2010**	**2010/2011**	**2011/2012**
PER DIEM HONORARIA[2]					
Attendance at Proceedings[3]	181,498	144,111	159,593	121,741	125,343
Preparation for Proceedings	77,896	58,683	75,322	80,262	81,904
Decision Writing	184,697	115,639	168,239	126,466	128,409
Board Education & Administration[4]	205,589	156,518	158,031	128,759	104,986
Case Conferences	90,763	49,178	75,742	108,067	91,817
PROCEEDINGS: RELATED EXPENSES					
Court Reporting Services	25,620	13,362	20,325	26,895	31,970
OTHER EXPENSES					
Independent Legal Services	199,631	140,030	127,050	140,625	167,835
Communications[5]	76,734	130,829	64,126	85,566	102,476
Travel[6]	n/a	n/a	28,471	34,050	45,599
TOTAL	**$1,042,428**	**$808,350**	**$876,899**	**$852,429**	**$880,338**

[1] All figures in Canadian dollars, rounded to the nearest dollar.
[2] For the period of April 1, 2007 to March 31, 2008: Public member - $380; Vice-Chair - $470
For the period of April 1, 2008 to March 31, 2009: Public member - $391; Vice-Chair - $484
For the period of April 1, 2009 to March 31, 2012: Public member - $398; Vice-Chair - $491
[3] Includes attendance, deliberation and cancellations.
[4] Includes education, administration, retro payments, travel time and all Board/Committee meetings.
[5] Includes language and sign interpretation, assistive listening devices, translation, printing, copying, access fees, mailing, telephone, teleconference, and office supplies.
[6] Includes cost of travel expenses, accommodation and facility rental. Travel expenses have been isolated from communications.

F. TPAP OPERATIONAL PERFORMANCE

The HSARB has an associated separately appointed panel called the Transitional Physician Audit Panel (TPAP) that hears appeals from decisions by the General Manager of OHIP in respect of payments to physicians. Proceedings are not open to the public and decisions are confidential. Under the terms of the *Health Insurance Act*, these members can only hear matters specifically assigned to the Panel by the Act. As of March 31, 2010, the Physician Payment Review Board (PPRB) has replaced the TPAP. The TPAP maintains its jurisdiction with respect to all matters appealed to it prior to March 31, 2010.

The TPAP may give any of the following directions:

1. Confirm the decision or opinion of the General Manager;
2. The General Manager to make a payment in accordance with the submitted account.
3. The General Manager to pay a reduced amount, as calculated by the General Manager in accordance with the direction.
4. That the physician reimburse the Plan in the amount calculated by the General Manager in accordance with the direction.

TPAP Caseload Summary

CASELOAD SUMMARY	2007 / 2008	2008 / 2009	2009 / 2010	2010 / 2011	2011 / 2012
Active Caseload at the beginning of the period	95	100	105	103	3
Requests Received	7	9	4	0	0
Total Case Load	102	109	109	103	3
PHC Convened	3	7	13	4	0
Matters Concluded*	2	4	6	100	0
Active Caseload at End of Period	**100**	**105**	**103**	**3**	**3**

*Includes those matters resolved, abandoned or administratively closed.

TPAP FINANCIAL PERFORMANCE[1]

DESCRIPTION	2007/2008	2008/2009	2009/2010	2010/2011	2011/2012
Per Diem Honoraria[2]	338	3,841	11,985	11,952	0
Other Expenses	415	216	453	53	0
TOTAL	**$753**	**$4,057**	**$12,438**	**$12,005**	**$0**

[1] All figures in Canadian dollars, rounded to the nearest dollar.
[2] For the period of April 1, 2007 to March 31, 2009: Professional Member - $635
For the period of April 1, 2009 to March 31, 2012: Professional Member - $664

G. OHCAP REVIEW COMMITTEE OPERATIONAL PERFORMANCE

Members of the public can apply to the Ontario Hepatitis C Assistance Plan (OHCAP) through the Ministry of Health for financial assistance if before January 1, 1986, or from July 2, 1990 to September 28, 1998:

- they contracted hepatitis C virus (HCV) through the blood system in Ontario;
- they were infected with HCV by a spouse, partner or mother who contracted HCV through the blood system in Ontario; or
- they are the personal representative of an estate of an individual who contracted the HCV through the blood system in Ontario during the period covered by the Ontario Plan.

Appeals from the decision of the OHCAP Program Office can be made to the Ontario Hepatitis C Assistance Plan Review Committee. Proceedings are not open to the public and decisions are confidential. The Minister appoints members. Further information can be obtained from the Ministry of Health website at www.health.gov.on.ca under The Ontario Hepatitis C Assistance Plan.

OHCAP Review Committee Caseload Summary

CASELOAD SUMMARY	2007 / 2008	2008 / 2009	2009 / 2010	2010 / 2011	2011 / 2012
Active Caseload at the beginning of the period	63	78	64	19	16
Requests Received	36	42	13	8	9
Total Caseload	**99**	**120**	**77**	**27**	**25**
Decisions Issued	13	41	25	6	13
Matters Concluded*	8	15	33	5	4
Active Caseload at End of Period	**78**	**64**	**19**	**16**	**8**

* Includes those matters resolved, abandoned or administratively closed.

OHCAP REVIEW COMMITTEE FINANCIAL PERFORMANCE[1]

DESCRIPTION	2007/2008	2008/2009	2009/2010	2010/2011	2011/2012
Per Diem Honoraria[2]	6,600	16,170	28,330	13,134	15,821
Other Expenses	1,113	996	1,360	596	1,053
TOTAL	**$7,773**	**$17,165**	**$29,690**	**$13,730**	**$16,874**

[1] All figures in Canadian dollars, rounded to the nearest dollar.
[2] For the period of April 1, 2007 to March 31, 2008: Public member - $380
For the period of April 1, 2008 to March 31, 2009: Public member - $391
For the period of April 1, 2009 to March 31, 2012: Public member - $398

H. COMBINED BOARD ACTIVITY

The following data is a representation of the combined board activity experienced throughout the past four fiscal cycles.

Combined Health Boards Active Caseload

ACTIVE CASELOAD	2007 / 2008	2008 / 2009	2009 / 2010	2010 / 2011	2011 / 2012
HPARB	891	917	904	773	625
HSARB	407	600	535	457	293
OHCAP	78	64	19	16	8
TPAP	100	105	103	3	3
Total	**1476**	**1686**	**1561**	**1249**	**929**

Combined Health Boards Intake

INTAKE BY BOARD	2007 / 2008	2008 / 2009	2009 / 2010	2010 / 2011	2011 / 2012
HPARB	553	457	500	627	764
HSARB	406	475	424	393	341
OHCAP	36	42	13	8	9
TPAP	7	9	4	0	0
Total	**1002**	**983**	**941**	**1028**	**1114**

I. HPARB MEMBERSHIP LIST AS AT MARCH 31, 2012

Last name	First name	OIC original start date	OIC expiration date	Position	Location
Bates*	Timothy	28-Jul-10	27-Jul-12	Public Member	Toronto
Beamish*	James T.	02-Dec-09	01-Dec-14**	Public Member	Toronto
Belanger-Hardy*	Louise Y.	20-Jun-07	19-Jun-16	Public Member	Ottawa
Bossin*	Michael	07-Mar-07	06-Mar-17**	Public Member	Ottawa
Boucher*	Michael	03-Sep-08	02-Sep-13	Public Member	London
Burstyn*	Marla K.	11-Mar-09	10-Mar-14	Public Member	Toronto
Cohen	Sheldon	22-Dec-05	21-Dec-13	Public Member	Toronto
D'Amours*	Marc	18-Feb-09	17-Feb-14	Public Member	L'Orignal
Dault*	James F.	20-Jun-07	19-Jun-16**	Public Member	Barrie
Denov	Celia	05-Jan-06	04-Jan-14	Public Member	Toronto
Downing*	Beth	02-Dec-09	01-Dec-14**	Public Member	Oakville
Farha*	Soraya	11-Mar-09	10-Mar-14	Public Member	Toronto
Foda	Rabiz	27-Jun-07	26-Jun-15	Public Member	Mississauga
Getson	Gary	03-Feb-06	02-Feb-14	Public Member	Unionville
Go*	Avvy Yao-Yao	02-Mar-05	01-Mar-13	Public Member	Toronto
Goldberg*	Bonnie	13-Feb-08	12-Feb-13	Public Member	Toronto
Gordon	Phyllis	06-Jun-07	05-Jun-12	Public Member	Toronto
Grant*	Norma D.	03-Sep-08	02-Sep-13	Public Member	Toronto
Gruben*	Vanessa	02-Dec-09	01-Dec-14**	Public Member	Ottawa
Heyninck*	Emanuela	15-Sep-10	14-Sep-12	Public Member	London
Huscroft*	Grant	09-Jul-08	08-Jul-13	Public Member	London
Jovanovic*	Stephen	30-May-06	29-May-14	Public Member	Windsor
Kelly*	Thomas J. J.	15-Dec-05	14-Dec-13	Public Member	London
King	Christopher	03-Feb-06	02-Feb-14	Public Member	Markham
Kovanchak*	Stephen G.	08-Apr-09	07-Apr-14	Public Member	Thunder Bay
Lamoureux*	Linda	23-Aug-05	22-Aug-13	Chair	Markham
Lobu*	Taivi	11-Apr-06	23-Feb-13	Vice-Chair	Toronto
Makhamra*	Samia	07-May-08	06-May-16	Public Member	Toronto
McKelvey	Darcie	13-Feb-08	12-Feb-13	Public Member	Caledon
McKeown*	Sharon	25-Feb-09	24-Feb-14	Public Member	Windsor

* Cross-appointed to the HSARB

** Under O. Reg 88/11 of the *Adjudicative Tribunal Accountability, Governance and Appointments Act*, Members were reappointed using an Automatic Waiver Form. In these cases, the merit-based process was waived for the following circumstance: "If a member of a tribunal is being reappointed."

Last name	First name	OIC original start date	OIC expiration date	Position	Location
Moss*	Christine T.	11-Mar-09	10-Mar-14	Public Member	Toronto
Nakamura	Mark	13-Feb-08	12-Feb-13	Public Member	Toronto
Ouellet*	Sonia C.	07-Mar-07	06-Mar-17**	Public Member	Ottawa
Petryna	Brenda	10-Aug-06	09-Aug-14	Public Member	Sudbury
Proulx*	Chantal	18-Feb-09	17-Feb-14	Public Member	Ottawa
Ryan Elliott*	Kathleen	07-Mar-07	06-Mar-17**	Public Member	Cobourg
Sanchez de Malicki	Elvira	28-May-08	27-May-13	Public Member	Toronto
Shamess	Carol	30-May-06	29-May-14	Public Member	Sault Ste. Marie
Siddiqui*	Yasmeen	12-May-10	11-May-12	Public Member	Toronto
Sossin*	Lorne	25-Oct-06	24-Oct-12	Public Member	Toronto
Steele*	Robert L.	08-Oct-08	07-Oct-13	Public Member	Burlington
Stewart Ferreira	Lydia	04-Feb-09	03-Feb-14	Public Member	Toronto
St-Hilaire*	Gabrielle H.	30-Apr-08	29-Apr-13	Public Member	Ottawa
Taylor	Phillip S.	05-Jan-06	04-Jan-14	Public Member	Toronto
Tye*	Hugh	16-Apr-08	15-Apr-13	Public Member	Dundas
Vauthier*	Janice H.	15-Dec-05	23-Feb-13	Vice-Chair	Thunder Bay
Wilton*	Carol	20-Oct-10	19-Oct-12	Public Member	Hamilton

* Cross-appointed to the HSARB

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HSARB MEMBERSHIP LIST AS AT MARCH 31, 2012

Last name	First name	OIC original start date	OIC expiration date	Position	Location
Bates*	Timothy	28-July-10	27-Jul-12	Public Member	Toronto
Beamish*	James T.	02-Dec-09	01-Dec-14**	Public Member	Toronto
Bélanger-Hardy*	Louise Y.	25-Mar-09	24-Mar-14	Public Member	Ottawa
Bossin*	Michael	23-Mar-11	22-Mar-13	Public Member	Ottawa
Boucher*	Michael	18-Nov-09	24-Nov-14**	Public Member	London
Burstyn*	Marla K.	03-Nov-04	20-Nov-12	Public Member	Toronto
Cohen	May	09-Apr-03	08-Apr-14	Public Member	Toronto
D'Amours*	Marc	18-Feb-09	17-Feb-14	Public Member	L'Orignal
Dault*	James F.	02-Dec-09	01-Dec-14**	Public Member	Barrie
Downing*	Beth	15-Jul-05	14-Jul-13	Public Member	Oakville
Farha*	Soraya	03-Mar-04	02-Mar-17**	Vice-Chair	Toronto
Go*	Avvy Yao-Yao	18-Apr-11	17-Apr-13	Public Member	Toronto
Goldberg*	Bonnie	23-Mar-11	22-Mar-13	Public Member	Toronto
Grant*	Norma	23-Mar-11	22-Mar-13	Public Member	Toronto
Gruben*	Vanessa T.	02-Dec-09	01-Dec-14**	Public Member	Ottawa
Heyninck*	Emanuela	15-Sep-10	14-Sep-12	Public Member	London
Huscroft*	Grant	09-Feb-11	08-Feb-13	Public Member	London
Jovanovic*	Stephen	11-Mar-09	10-Mar-14	Public Member	Windsor
Kelly*	Thomas J. J.	11-Mar-09	10-Mar-14	Public Member	London
Kovanchak*	Stephen G.	08-Apr-09	07-Apr-14	Public Member	Thunder Bay
Lamoureux*	Linda P.	23-Apr-08	22-Aug-13	Chair	Markham
Lawford	Michele J.	16-Feb-00	20-Feb-14	Public Member	Kingston
Lobu*	Taivi	11-Mar-09	10-Mar-14	Public Member	Toronto
Lum	Lillie Lai Quon	01-Feb-99	22-Mar-13	Public Member	Thornhill
Makhamra*	Samia	23-Mar-11	22-Mar-13	Public Member	Toronto
McKeown*	Sharon	25-Feb-09	24-Feb-14	Public Member	Windsor
Moss*	Christine T.	01-Feb-99	22-Mar-13	Public Member	Toronto
Mullan	Elizabeth A.	15-Apr-03	14-Apr-14	Public Member	Toronto
Ouellet*	Sonia	03-May-10	02-May-12	Vice-Chair	Ottawa
Proulx*	Chantal	18-Feb-09	17-Feb-14	Public Member	Ottawa

* Cross-appointed to the HPARB

** Under O. Reg 88/11 of the *Adjudicative Tribunal Accountability, Governance and Appointments Act*, Members were reappointed using an Automatic Waiver Form. In these cases, the merit-based process was waived for the following circumstance: "If a member of a tribunal is being reappointed."

Last name	First name	OIC original start date	OIC expiration date	Position	Location
Ryan Elliott*	Kathleen	23-Mar-11	22-Mar-13	Public Member	Cobourg
Siddiqui*	Yasmeen	12-May-10	11-May-12	Public Member	Toronto
Sossin*	Lorne	11-Mar-09	10-Mar-14	Public Member	Toronto
Steele*	Robert	23-Mar-11	22-Mar-13	Public Member	Burlington
St-Hilaire*	Gabrielle H.	11-Mar-09	10-Mar-14	Public Member	Ottawa
Tye*	Hugh	23-Mar-11	22-Mar-13	Public Member	Hamilton
Vauthier*	Janice H.	11-Mar-09	10-Mar-14	Public Member	Thunder Bay
Wilton*	Carol	20-Oct-10	19-Oct-12	Public Member	Hamilton
Yedvab	Jay Okun	07-May-04	04-Jul-12	Public Member	Toronto

* Cross-appointed to the HPARB

** Under O. Reg 88/11 of the *Adjudicative Tribunal Accountability, Governance and Appointments Act*, Members were reappointed using an Automatic Waiver Form. In these cases, the merit-based process was waived for the following circumstance: "If a member of a tribunal is being reappointed."

TPAP MEMBERSHIP LIST AS AT MARCH 31, 2012

Last name	First name	OIC original start date	OIC expiration date	Position	Location
Darani	Shaheen A.	23-Jul-08	22-Jul-12	Panel Member	Toronto
Fisher	Garry	23-Jul-08	22-Jul-12	Panel Member	Simcoe
Freedman	Paul Edward	21-Dec-04	07-Jul-12	Panel Member	Toronto
Kerenyi	Norbert Andrew	21-Dec-04	07-Jul-12	Panel Member	Toronto
Lamoureux	Linda P.	23-Apr-08	22-Aug-13	Chair	Markham
Ng	Nelly Wing-Kwong	21-Dec-04	07-Jul-12	Panel Member	North York
Opler	Susan E.	23-Jul-08	22-Jul-12	Panel Member	Toronto
Ramsbottom	David J.	23-Jul-08	22-Jul-12	Panel Member	Dundas
Rasky	Holly	20-Jun-07	07-Jul-12	Panel Member	Toronto
Seif	Atih	23-Jul-08	07-Jul-12	Panel Member	North York

OHCAP REVIEW COMMITTEE MEMBERSHIP LIST AS AT MARCH 31, 2012

Last name	First name	OIC original start date	OIC expiration date	Position	Location
Maben	Ruth	11-Jul-08	30-Sep-12	Committee Member	Oakville
Lamoureux	Linda P.	11-Jul-08	06-Nov-12	Chair	Markham
O'Neil	Kathleen	28-Aug-08	30-Sep-12	Committee Member	Toronto
Strevens	Linda	31-Jul-09	30-Sep-12	Committee Member	Toronto

J. HEALTH BOARDS SECRETARIAT STAFF LIST AS AT MARCH 31, 2012

Staff Member	Position
Lori Coleman	Registrar
Sara van der Vliet	Deputy Registrar
Sandra Evora	Executive Assistant/Researcher
Chris Popovich	Executive Assistant/Researcher
Natalya Demyanenko	Case Management Coordinator
Alpha Aberra	Case Officer
Maureen Baker	Case Officer
Andrew Clifford	Case Officer
Anna Dunscombe	Case Officer
Kate Franklin	Case Officer
Shanti Persaud	Case Officer
Glenn Sequiera	Case Officer
Christine Nieckarz	Administration Coordinator
Margaret Bolinas	Administrative Assistant
Jada Fung	Administrative Assistant
Mallory Hyde	Administrative Assistant
Sarah Oliver	Administrative Assistant
Mathanan Kailas	Senior Technology/Business Systems Administrator
Aravinth Ramalingam	Systems Support Analyst
Gui Dickie	Systems Officer